

Clear Form

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 02/2015)		TRANSCRIPT ORDER Please use one form per court reporter. CJA counsel please use Form CJA24 Please read instructions on next page.	
1a. CONTACT PERSON FOR THIS ORDER <b>Diana Benitez</b>		2a. CONTACT PHONE NUMBER (213) 955-8037	
1b. ATTORNEY NAME (if different) <b>William A. Delgado</b>		2b. ATTORNEY PHONE NUMBER (213) 955-9240	
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE)  <b>Willernen Loh &amp; Delgado LLP 707 Wilshire Blvd., Suite 3850, Los Angeles, CA 90017</b>		5. CASE NAME  <b>Lagree Technologies, Inc., v. Spartacus 20th L.P.</b>	
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX)→ <input type="checkbox"/> FTR  <b>Raynee Mercado</b>		8. THIS TRANSCRIPT ORDER IS FOR:  <input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached) <input type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL      CJA: Do not use this form; use Form CJA24.	
9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:			
a. HEARING(S) (OR PORTIONS OF HEARINGS)			
b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.)			
DATE	JUDGE (initials)	TYPE (e.g. CMC)	PORTION If requesting less than full hearing, specify portion (e.g. witness or time)
03/24/2017	JST	Motion	<input checked="" type="radio"/> TEXT/ASCII (email) <input type="radio"/> PAPER <input type="radio"/> CONDENSED (email) <input type="radio"/> ECF ACCESS (web)
			<input type="radio"/> ORDINARY (30-day) <input type="radio"/> 14-Day <input type="radio"/> EXPEDITED (7-day) <input type="radio"/> DAILY (Next day) <input type="radio"/> HOURLY (2 hrs) <input type="radio"/> REALTIME
10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:			
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional).			
11. SIGNATURE <b>/s/ Diana Benitez</b>			
DISTRIBUTION: <input type="checkbox"/> COURT COPY <input type="checkbox"/> TRANSCRIPTION COPY			
12. DATE <b>04/06/2017</b>			
13. ORDER RECEIPT <input checked="" type="checkbox"/> ORDER COPY			